

Statewide Portable Equipment Registration Program
FORM 5 - Reactivation of an Expired Registration
 (Auto-fill format. Use "Tab" or up/down arrows to enter information)

1. Company Name: _____					
2. Registration Number: _____					
3. Indicate Reactivation of an Engine or Equipment Unit (choose one)					
<div style="margin-bottom: 20px;"> <input type="checkbox"/> Engine Reactivation </div> <div style="margin-left: 40px;"> <input type="checkbox"/> \$825 No Discount Available <input type="checkbox"/> \$738.75 25% discount: 4 – 9 engines inspected at one time <input type="checkbox"/> \$704.25 35% discount: 10 or more engines inspected at one time </div> <div style="margin-top: 20px;"> Company Unit ID number (optional): _____ Describe the general use of the engine: _____ Home District Designation (required): _____ </div> <div style="margin-top: 20px;"> Note: If engine already has a placard, see instructions for alternative fees. If the company information has changed, see instructions for appropriate form. </div>					
<div style="margin-bottom: 20px;"> <input type="checkbox"/> Equipment Unit Reactivation </div> <div style="margin-left: 40px;"> <input type="checkbox"/> \$555 No Discount Available </div> <div style="margin-top: 20px;"> Company Unit ID number (optional): _____ Describe the general use of the equipment unit: _____ Home District Designation (required): _____ </div> <div style="margin-top: 20px;"> Note: If equipment unit already has a placard, see instructions for alternative fees. If the company information has changed, see instructions for appropriate form. </div>					
4. Name of Responsible Party: _____		Title: _____			
5. Signature of Responsible Party: _____		Date: _____			
6. Total Fees: \$ _____	<table style="width:100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> Enclose Check Payable To: ARB / PERP Air Resources Board P.O. Box 2038 Sacramento, CA 95812 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> OR </td> <td style="width: 57%; vertical-align: top;"> Bill to Credit Card: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express </div> <div style="margin-top: 20px;"> Credit Card No. _____ Expiration Date _____ </div> </div> </td> </tr> </table>		Enclose Check Payable To: ARB / PERP Air Resources Board P.O. Box 2038 Sacramento, CA 95812	OR	Bill to Credit Card: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express </div> <div style="margin-top: 20px;"> Credit Card No. _____ Expiration Date _____ </div> </div>
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NOTE: This form is specifically for reactivations of expired registrations. Use this form only if the engine or equipment unit previously held registration with the Air Resources Board and belongs to the same company when the registration was current. Non-certified (Tier 0) engines will not be accepted for reactivation.

Reactivation of an Expired Registration: *Please provide the following information:*

1. *Company Name* - Legal name on current registration
2. *Registration Number* - This is the unique number assigned to the engine or equipment unit and is listed on the Statewide Registration Program certificate.
3. *Indicate Reactivation of an Engine or Equipment Unit* - Check the box that best describes the action you wish:

Engine Reactivation - Check this box if wish to reactivate an engine with an expired ARB registration. Attach **Form 8, Administrative Actions for Existing Registrations**, if any of the company information has changed.

Enter your company unit I.D. number. This is the number your company uses to identify the unit. Indicate the type of unit the engine powers, i.e., generator, compressor, etc. Indicate the "home district" which is the one air pollution control or air quality management district in which this engine is most often operated. It is required that a home district be designated.

If the engine is designated emergency or low use, check the appropriate box. There are strict limitations for operation of engines so designated. Please review the Portable Diesel Engine ATCM to determine if your engine can comply with these limitations. <http://www.arb.ca.gov/portable/perp/peatcm091207.pdf>

The engine reactivation fee is a combined total of the renewal fee and a \$250 expiration fee.

The following renewal fees apply depending on multiple engine inspection discount level and whether or not the unit already has a placard. The discount amounts only apply to engines, not equipment units:

Discount Level	Renewal Fee	Renewal Fee if unit already has a placard	Expiration Fee
No discount	\$575.00	\$570.00	\$250.00
25% discount : 4 – 9 engines inspected at one time	\$488.75	\$483.75	\$250.00
35% discount: 10 or more engines inspected at one time	\$454.25	\$449.25	\$250.00
Equipment units (no discount available)	\$305.00	\$300.00	\$250.00

IMPORTANT - The 25% discount requires 4 to 9 engines and the 35% discount requires 10 or more engines to be inspected together. Failure to have the engines at the agreed upon location may result in district enforcement action.

Equipment Unit Reactivation - Check this box if wish to reactivate an equipment unit with an expired ARB registration. Attach **Form 8, Administrative Actions for Existing Registrations**, if any of the company information has changed.

Enter your company unit I.D. number. This is the number your company uses to identify the unit. Indicate the type of equipment unit, i.e., wood chipper, screening plant, etc. Indicate the "home district" which is the one air pollution control or air quality management district in which this equipment unit is most often operated. It is required that a home district be designated.

The equipment unit reactivation fee is a combined total of the renewal fee and a \$250 expiration fee.

4. – 5. *Name, Title, Date, and Signature of Responsible Party* – Name and official title of person signing and dating form. (Application will not be accepted unless signed and dated.)
6. *Total Fees* - Please write the dollar amount due. This is the grand total of all fees required for all transactions requested and attached to this application.